

# FEE(S) TRANSMITTAL

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<b>CURRENT CORRESPONDENCE ADDRESS</b>  <div style="text-align: center;"> <b>Vollrath &amp; Associates</b>  <b>588 Sutter St. #531</b>  <b>San Francisco, CA 94102</b> </div>		<b>Certificate of Mailing</b>  I hereby certify that this Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop Issue Fee address above on the date indicated below.	
		Jorgen Vollrath7 (Depositor's name)	
		(Signature)	
		February 15, 2007 (Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTY'S DOCKET NO.
10/734,921	12/12/2003	Vladislav Vashchenko	P05752
			CONFIRMATION NO. 2249

TITLE OF INVENTION CASCODED BI-DIRECTIONAL HIGH VOLTAGE ESD PROTECTION STRUCTURE					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
Nonprovisional	No	\$1400	\$0	\$1400	02/15/2007

EXAMINER	ART UNIT	CLASS-SUB CLASS
Jackson Jr., Jerome	2815	257-173000
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached. Use of a Customer Number is required.		
2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.		
1. <b>Jorgen Vollrath</b> 2. _____ 3. _____		

**3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)**

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

<b>(A) NAME OF ASSIGNEE:</b> National Semiconductor Corporation	<b>(B) RESIDENCE: (CITY and STATE OR COUNTRY)</b> 2900 Semiconductor Drive Santa Clara, CA 950 95051
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Please check the appropriate assignee category or categories (will not be printed on the patent)

☐ Individual ☒ corporation or other private group entity ☐ government

<b>4a. The following fee(s) are enclosed:</b>  <input checked="" type="checkbox"/> Issue Fee <input type="checkbox"/> Publication Fee <input checked="" type="checkbox"/> Advanced Order - # of Copies <u>5</u>	<b>4b. Payment of Fee(s):</b>  <input checked="" type="checkbox"/> A check in the amount of the fee(s) enclosed (\$1,415.00) <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.  <input type="checkbox"/> The Commissioner is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).
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COMMISSIONER FOR PATENTS is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature) _____  Attorney Jorgen Vollrath Reg. No. 49,098	(Date) February 15, 2007	02/22/2007 ZJUHA2 00000027 10734921  01 FC:1501 02 FC:8001  1400.00 OP 15.00 OP
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